



CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	16-20 =	0	X \$ 18.00 =	\$0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	8-3 =	5	X \$ 86.00 =	\$430.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$290.00 =	\$0.00
				BASIC FEE (37 CFR 1.16(a))	\$770.00
			Total of above Calculations =		\$1,200.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
	TOTAL =				\$1,200.00

19. Small entity status


- a. ☐ A small entity statement is enclosed
- b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. ☐ Is no longer claimed.

20. ☒ A check in the amount of \$ 1,200.00 to cover the filing fee is enclosed.

21. ☒ A check in the amount of \$ 40.00 to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. ☒ Fees required under 37 CFR 1.16.
- b. ☒ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	CARL B. WISCHHUSEN (Reg. No. 43,279)
SIGNATURE	
DATE	FEBRUARY 17, 2004

Form #125

NY\_MAIN 408501v1



16938

U.S. PTO

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

00862.100128.

First Named Inventor or Application Identifier

JOJI OKI

Express Mail Label No.

32855 U.S. PTO

10/779688

021804

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:**Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-14501. ☐ Fee Transmittal Form  
(Submit an original, and a duplicate for fee processing)2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.3. ☒ Specification Total Pages 4. ☒ Drawing(s) (35 USC 113) Total Sheets 5. ☒ Oath or Declaration Total Pages a. ☒ Newly executed (original or copy)b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 17 completed)i. ☐ **DELETION OF INVENTOR(S)**  
Signed Statement attached deleting  
inventor(s) named in the prior application, see  
37 CFR 1.63(d)(2) and 1.33(b).6. ☒ Application Data Sheet. See 37 CFR 1.767. ☐ CD-ROM or CD-R in duplicate, large table or Computer  
Program (Appendix)8. ☐ Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)a. ☐ Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies); orii. ☐ paperc. ☐ Statements verifying identity of above copies**ACCOMPANYING APPLICATION PARTS**9. ☒ Assignment Papers (cover sheet & document(s))10. ☐ 37 CFR 3.73(b) Statement ☒ Power of Attorney  
(when there is an assignee)11. ☐ English Translation Document (if applicable)12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS  
Citations13. ☐ Preliminary Amendment14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)16. ☐ Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. \_\_\_\_/\_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**18. CORRESPONDENCE ADDRESS**☒ Customer Number or Bar Code Label   
(Insert Customer No. or Attach bar code label here) or ☐ Correspondence address below

NAME

Address

City

Country

State

Telephone

Zip Code

Fax